UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/067,843	02/08/2002	Kenji Iwano	2002_0211A	9646

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EXAMINER
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ART UNIT	PAPER NUMBER
3626	

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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

	Application No.	Applicant(s)
Office Action Summary	10/067,843	IWANO ET AL.
	Examiner	Art Unit	
	DILEK B. COBANOGLU	3626	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE *3* MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.
- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1)☒ Responsive to communication(s) filed on *25 November 2008*.

2a)☒ This action is **FINAL**.   2b)☐ This action is non-final.

3)☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4)☒ Claim(s) *1 and 3-17* is/are pending in the application.

    4a) Of the above claim(s) _____ is/are withdrawn from consideration.

5)☐ Claim(s) _____ is/are allowed.

6)☒ Claim(s) *1 and 3-17* is/are rejected.

7)☐ Claim(s) _____ is/are objected to.

8)☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9)☐ The specification is objected to by the Examiner.

10)☐ The drawing(s) filed on _____ is/are: a)☐ accepted or b)☐ objected to by the Examiner.

    Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

    Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).

11)☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12)☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

    a)☐ All   b)☐ Some * c)☐ None of:

      1.☐ Certified copies of the priority documents have been received.

      2.☐ Certified copies of the priority documents have been received in Application No. _____.

      3.☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

    * See the attached detailed Office action for a list of the certified copies not received.

DETAILED ACTION

Notice to Applicant

1.   This communication is in response to the amendment received on 11/25/2008.

Claims 1, 3-17 remain pending in this application.

New Matter

2.   The new matter rejection has been withdrawn due to the amendments made to

the claims.

Claim Rejections - 35 USC § 103

3.   The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all

obviousness rejections set forth in this Office action:

> (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

4.   Claims 1, 3-17 are rejected under 35 U.S.C. 103(a) as being unpatentable over

Joao (hereinafter Joao) (U.S. Patent No. 6,283,761 B1), Califano et al. (hereinafter

Califano) (U.S. Patent Publication No. 2003/0039362 A1) and further in view of Felsher

(US 2002/0010679 A1).

    A.   Claim 1 has been amended now to recite a medical information system

    comprising:

        i.   a patient server comprising a first database, said patient server

        receiving vital information and unique identifications allocated to patients,

        storing and managing the received vital information and unique

identifications in said first database such that the vital information is

associated with a corresponding unique identification (Joao: col. 12, lines

50-67; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 16,

lines 38-65; col. 23, lines 48-60; Fig. 1), and such that correspondence

between each of the unique identification and patient data, wherein the

patient data includes at least a patient name, is unrecognizable, and

transmitting the stored and managed vital information and unique

identifications;

ii.   a medical care provider server connected to said patient server

through a first network, and comprising a second database, said medical

care provider server receiving the vital information, and unique

identifications from said first database of said patient server through the

first network, storing and managing the received vital information, unique

identifications, and patient data in said second database, associate each

of the unique identifications with corresponding patient data, identifying

corresponding patient data using each of the unique identifications, and

allowing the stored and managed vital information, unique identifications,

and patient data to be browsed (Joao: col. 12, lines 50-67; col. 13, lines 1-

7 and 38-51; col. 14, lines 49-67; col. 15, lines 1-17; col. 23, lines 48-60;

Fig. 1);

iii.   a patient terminal connected to said patient server through a

network, said patient terminal transmitting the vital information and unique

identifications to said patient server through the network (Joao: col. 12,

lines 50-57; col. 13, lines 38-51; col. 14, lines 49-67; col. 15, lines 1-17;

col. 23, lines 48-60; Fig. 1); and

iv.   a doctor terminal connected to said medical care provider server

through a network, said doctor terminal browsing the vital

information, unique identifications, and patient data stored and

managed in the medical care provider server through the network (Joao:

col. 12, lines 57-67; col. 13, lines 1-7 and 38-51; col. 14, lines 49-67; col.

15, lines 1-17; col. 23, lines 48-60; Fig. 1).

v.   wherein the first network is configured to allow communication

between said patient server and said medical care provider server and

disallow communication between either said patient terminal or said doctor

terminal and either said patient server or said medical care provider

server, and disallow communication between said patient terminal and

said doctor terminal (Joao: col. 13, lines 42-45; col. 15, lines 54-58; col.

40, lines 51-60),

vi.   wherein the second network is configured to allow communication

between said patient terminal and said patient server, and disallow

communication among said patient server, said medical care provider

server, and said doctor terminal (Joao: col. 13, lines 42-45; col. 15, lines

54-58; col. 40, lines 51-60), and

vii.   wherein the third network is configured to allow communication between said doctor terminal and said medical care provider server, and disallow communication among said patient server, said medical care provider server, and said patient terminal (Joao: col. 13, lines 42-45; col. 15, lines 54-58; col. 40, lines 51-60).

- Joao fails to expressly teach that correspondence between each of the unique identification and patient data, wherein the patient data includes at least a patient name, is unrecognizable, and transmitting the stored and managed vital information and unique identifications. However, this feature is well known in the art, as evidenced by Califano.

  In particular, Califano discloses correspondence between each of the unique identification and patient data, wherein the patient data includes at least a patient name, is unrecognizable, and transmitting the stored and managed vital information and unique identifications (Califano; abstract, par. 0010).

  It would have been obvious to one having ordinary skill in the art at the time of the invention to include the aforementioned limitation as disclosed by Califano with the motivation of to protect confidential information of patients (Califano; par. 0010).

- Joao fails to expressly disclose a medical information system comprising: second and third networks. However, these features are notoriously well known in the art, as evidenced by Felsher. In particular, Felsher discloses a medical information system according to claim 1, further comprising: second and third networks (Felsher; abstract; Fig. 1).

  Examiner also notes that Joao does teach a system having a single computer or system of computers and/or may include a plurality of computers or computer systems (i.e., networks) that are utilized in conjunction with one another (i.e., the systems are networked together) (Joao: col. 13, lines 42-45). As such, Examiner considers a broad yet reasonable interpretation of Joao to also teach Applicant's recitation of multiple networks interconnected within a larger network.

  One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Felsher with the teachings of Joao with the motivation of providing a secure system for exchanging confidential information (Felsher; abstract).

B.   As per claim 3, Joao discloses a medical information system according to claim 1, further comprising a sensor for measuring vital data, wherein the vital

information includes a measurement value by said sensor (Joao: col. 23, lines
47-61).

C.   Claim 4 has been amended now to recite a medical information system
according to claim 1, wherein:

i.   said doctor terminal transmits, as consultation data, an inquiry
regarding a health status of a patient to said medical care provider server
through the network (Joao: col. 31, lines 65-67; col. 32, lines 1-47; Fig. 1);
and

ii.   the vital information transmitted from said patient terminal to said
patient server through the network includes a reply to the inquiry
transmitted to said patient terminal (Joao: col. 31, lines 65-67; col. 32,
lines 1-47; Fig. 1).

- Joao fails to expressly disclose a medical information system
  according to claim 1, wherein: the system comprises second
  and third networks. Nevertheless, these features are notoriously
  well known in the art, as evidenced by Felsher.
  In particular, Felsher discloses a medical information system
  according to claim 2, wherein: system comprises second and
  third networks (Felsher; abstract; Fig. 1).
  Examiner also notes, however, that Joao does teach a system
  having a single computer or system of computers and/or may
  include a plurality of computers or computer systems (i.e.,

networks) that are utilized in conjunction with one another (i.e.,

the systems are networked together) (Joao: col. 13, lines 42-

45). As such, Examiner considers a broad yet reasonable

interpretation of Joao to also teach Applicant's recitation of

multiple networks interconnected within a larger network.

One of ordinary skill would have found it obvious at the time of

the invention to combine the teachings of Felsher with the

teachings of Joao with the motivation of providing a secure

system for exchanging confidential information (Felsher

abstract).

D.   As per claim 5, Joao fails to expressly disclose a medical information

system according to claim 1, further comprising:

     i.   a first unauthorized access prevention section provided in the first

network.;

     ii.   a second unauthorized access prevention section provided in the

second network;

     iii.   a third unauthorized access prevention section provided in the third

network; and

     iv.   wherein said first and third unauthorized access prevention

sections have higher security levels than a security level of said second

unauthorized access prevention section.

Nevertheless, these features are old and well known in the art, as evidenced by Felsher. In particular, Felsher discloses a medical information system according to claim 1, further comprising: a first unauthorized access prevention section provided in the first network (Felsher; ¶ [0197]); a second unauthorized access prevention section provided in the second network (Felsher; ¶ [0197]); a third unauthorized access prevention section provided in the third network (Felsher; ¶ [0197]); and wherein said first and third unauthorized access prevention sections have higher security levels than a security level of said second unauthorized access prevention section (Felsher; ¶ [0197]).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Felsher with the teachings of Joao with the motivation of providing a secure system for exchanging confidential information (Felsher; abstract).

Examiner notes also that Joao teaches the use of various authorization, security and encryption techniques, technologies, and methods (Joao: col. 15, lines 54-58; col. 40, lines 51-60).

E.   As per claim 6, Joao fails to expressly disclose a medical information system according to claim 5, wherein:

i.   said first unauthorized access prevention section comprises a firewall and a virtual private network;

ii.   said second unauthorized access prevention section comprises a

remote access server; and

iii.   said third unauthorized access prevention section comprises a

terminal authentication server.

Nevertheless, these features are old and well known in the art, as

evidenced by Felsher. In particular, Felsher discloses a medical

information system according to claim 5, wherein: said first unauthorized

access prevention section comprises a firewall and a virtual private

network (Felsher; ¶ [0228]); said second unauthorized access prevention

section comprises a remote access server (Felsher; ¶ [0228]); and said

third unauthorized access prevention section comprises a terminal

authentication server (Felsher; ¶ [0228]).

Examiner notes also that Joao teaches the use of various authorization,

security and encryption techniques, technologies, and methods (Joao: col.

15, lines 54-58; col. 40, lines 51-60) and therefore, Joao strongly suggests

the aforementioned features above.

One of ordinary skill would have found it obvious at the time of the

invention to combine the teachings of Felsher with the teachings of Joao

with the motivation of providing a secure system for exchanging

confidential information (Felsher abstract).

F.   As claim 7, Joao discloses a medical information system according to claim 1, wherein the patient server and said medical care provider server are respectively clustered (Joao: abstract; col. 3, lines 33-53; Fig. 1).

G.   Claims 8-17 substantially repeat the same limitations as those of claims 1, 3-7 and therefore, are rejected for the same reasons given for those claims and incorporated herein.

Response to Arguments

5.   Applicant's arguments with respect to claims 1, 8 and 9 have been considered but are moot in view of the new ground(s) of rejection.

6.   Applicant argues about Joao does not teach "correspondence between each of the unique identification and patient data, wherein the patient data includes at least a patient name, is unrecognizable"; Examiner respectfully submits that Califano teaches "a system assigning a virtual private identity (VPI) to participants in a clinical study (or to patients). The system creates an encrypted and secure database that contains the pairing between patient identity information and the assigned VPI. (Califano; abstract) The present application's specification recites "…Similarly with the data structure of the patient serer 1, the vital data is stored for each of the IDs allocated respectively to particular patient. Patient data is also stored for each of IDs. The patient data includes information for identifying particular patient such as name. …As described above, although the patient server 1 stores the vital data for each of the IDs, it does not store the patient data corresponding to each of the IDs. Accordingly, if the patient serer 1 were accessed without authorization, it would not be impossible to identify each of the

vital data with particular patient." In paragraphs 0074 and 0075. The reason for storing

patient ID and information of the patient's identification, such as name, gender etc.

separately is to protect the patient's identification information. This is done by Califano

by assigning a VPI to each patient, and creating an encrypted and secure database that

contains the pairing between patient identity information and the assigned VPI. The

reason for this is to securely storing genetic and medical data, as well as other types of

private information (Califano; par. 0010).

Conclusion

7.   **THIS ACTION IS MADE FINAL.** Applicant is reminded of the extension of time

policy as set forth in 37 CFR 1.136(a).

8.   A shortened statutory period for reply to this final action is set to expire THREE

MONTHS from the mailing date of this action. In the event a first reply is filed within

TWO MONTHS of the mailing date of this final action and the advisory action is not

mailed until after the end of the THREE-MONTH shortened statutory period, then the

shortened statutory period will expire on the date the advisory action is mailed, and any

extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of

the advisory action. In no event, however, will the statutory period for reply expire later

than SIX MONTHS from the mailing date of this final action.

9.   Any inquiry concerning this communication or earlier communications from the

examiner should be directed to DILEK B. COBANOGLU whose telephone number is

(571)272-8295. The examiner can normally be reached on 8-4:30.

10.   If attempts to reach the examiner by telephone are unsuccessful, the examiner's

supervisor, Christopher L. Gilligan can be reached on 571-272-6770. The fax phone

number for the organization where this application or proceeding is assigned is 571-

273-8300.

11.   Information regarding the status of an application may be obtained from the

Patent Application Information Retrieval (PAIR) system. Status information for

published applications may be obtained from either Private PAIR or Public PAIR.

Status information for unpublished applications is available through Private PAIR only.

For more information about the PAIR system, see http://pair-direct.uspto.gov. Should

you have questions on access to the Private PAIR system, contact the Electronic

Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a

USPTO Customer Service Representative or access to the automated information

system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/D. B. C./
Examiner, Art Unit 3626
2/20/2009

/C. Luke Gilligan/
Supervisory Patent Examiner, Art Unit 3626